

Wyoming Prevention Framework Community Grant Report

Attachment B

This report is for this time period

February 2007 - June 30, 2007

Please email this report as an **attachment** to...
Substance Abuse & Mental Health Services Division,
Wyo Dept. of Health
lisa.laake@health.wyo.gov

For information call 1-800-535-4006
or 307-777-6494

Today's Date

County

Contract Organization Name

Your Name

Your Mailing Address

City, State, Zip

Your Work Phone Number

Fax

Your Work Email Address

5/11/2007

Weston

Northern Wyoming Mental Health Center

Joy R. Eddy

420 Deanne Ave.

Newcastle WY 82701

307-746-44565

307-746-4470

joyeddy@rtconnect.net

Please keep both a hard-copy and file copy for your records

Item	Contract Deliverables	Date due	Percent Completed (or notes on amount completed)	Date Completed	Comments or Notes
A Staff, Board of Directors, Volunteers, Work Assignments, and Technical Assistance					
1	SPF Staff Hired (report name, percent of time, email address, phone number)	1-Feb-07			Joy Eddy, 100%, joyeddy@rtconnect.net, 307-746-4456
2	Supervise SPF staff/staff evaluation (note dates and any notes)				
3	Name, title, and phone number of the staff's supervisor				Mike Ratigan, County Manager, 307-746-4456
4	Criminal history record compliance (briefly note yes or no if any action was taken this quarter--do not report names)		100%		yes
5	Staff training and paid travel (list all training paid under the contract, dates, traveler name, amount)			CADCA Conference 2/07, Needs assesment training 3/07	
6	Notify the Division of any board of directors/staffing changes				none
7	Other Contract Work Agreements (report details)				none
8	Complete agreement with SPF-TAC				
9	Other				

B Needs Assessment Activities

1	Needs Assessment Training/Winter 07 Meeting	Feb or March 2007			
2	Needs Assessment Instrument Received	Feb or March 2007			
3	Data Collection		most of the numbers are collected for the workbook, need to answer questions		
4	Data Analysis				
5	Priorities Identified				
6	Needs Assessment Sent to SAD	1-Jun-07			
7	Receive SAD Comments @ Needs Assessment	15-Jun-07			
	Revise Needs Assess/Submit Final				
8	Other				

Item	Contract Deliverables	Date due	Percent Completed	Date Completed	Comments or Notes
C Community Infrastructure Activities					
1	Community Advisory Council Activities briefly list CAC activities				Monthly meetings, held town meeting, work on needs assesment workbook

	Community Advisory Council Meetings			02/22/2007, 3/22/07, 4/18/07, 4/26/07	
2	List dates & number of people who attended				usually 8 members attend
	See below for membership report				
3	Budget and Funding Approved by CAC (<i>attach minutes</i>)				
4	Community Resource Assessment				
	note date and attach report				
5	Present Findings/Process to Community				
6	(Optional) local SAPST and/or CADCA Training for SAC/Community				
7	Briefly describe how the community was involved in the SPF process during this reporting period				town hall meetings, interviews, prevention specialist speaks at town meetings, surveys to community members to return to WYSAC.
8	Other CAC/Infrastructure				

D Strategic Planning Activity

	Attend Strategic Planning Training	Jul-07			
	Receive Strategic Planning Materials from SAD				
	Research Evidence Based Strategies				
	Match Strategies to Data/Needs				
	Write Strategic Plan				
	Submit Strategic Plan to SAD				
	Receive SAD Comments/Revise/Final Plan	31-Aug-07			
	Other				

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E	Implementation (only with SAD approval)				

F Deliverables and Assurances Reports

	For February 1 - April 30				
1	May 15: Submit this report to SAD	15-May-07			
2	May 15: Submit Expenditure Report to SAD	15-May-07			
	For February 1 - June 30				
3	July 31: Submit CLI to SAMHSA	31-Jul-07			
	For May 1 - June 30				
4	July 31: Submit Expenditure Report to SAD	31-Jul-07			
	For May 1 - September 30				
5	October 15: Submit this report o SAD	15-Oct-07			
	For July 1 - September 30				
6	October 15: Submit Expenditure Report to SAD	15-Oct-07			
7	Complete evaluation agreement with WySAC	30-Mar-07			
8	Provide any other evaluation information				
9	Submit any requested data				
10	Obtain Chapter 16 Prevention Certification				
11	On-Site evaluations or reviews				
12	Post 2 newspaper ads/articles about the SPF grant (attach copy)			march 30,07	

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G	Other Information				
	Briefly describe any actions taken by the LEAD AGENCY (fiscal agency) board of directors or high level staff around the SPF SIG grant				
1					
	Restricted activities (report any approval requested and received for these)				
2					
	fairs/brochures/educational materials				
	media				
	Please note any significant changes from the budget submitted in the application.				
3					

